

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	J.B.	70000	10-27-99
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		71476	11/10/99 1/25/00

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Original	Date
1	✓	10-27-99
2	✓	10-27-99
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4	✓	10-27-99
5	✓	10-27-99
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10	✓	10-27-99
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19	✓✓✓✓✓A	
20	✓N N N N N	
21	N N N N N	
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39	✓✓✓✓✓A	
40	N N N N N	
41	N N N N N	
42	✓✓✓✓✓A	
43	✓✓✓✓✓A	
44	N N N N N	
45	N N N N N	
46	✓✓✓✓✓A	
47	✓✓✓✓✓A	
48	N N N N N	
49	N M N N N	
50	N M N N N	

Claim	Original	Date
51	✓✓✓✓✓A	10-27-99
52	✓	10-27-99
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Claim	Original	Date
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If more than 150 claims or 10 actions  
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